

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re patent application of

Hans Hansen.

Serial No. Unassigned

Filed: October 16, 2000

Group Art Unit: Unassigned

Examiner: Unassigned



For: MULTI-STAGE CASCADE BOOSTING VACCINE

CONTINUING PATENT APPLICATION
TRANSMITTAL LETTER

Assistant Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

☒ Continuation ☐ Division ☐ Continuation-In-Part (CIP)

of the co-pending United States patent application Serial No. 09/138,287, in which no patenting, abandonment, or termination of proceedings has occurred. Priority to application Serial No. 09/138,287 and 08/268,129 now U.S. Patent No. 5,798,100, is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior applications are considered as being part of the disclosure of the accompanying continuing application and are herein incorporated by reference in their entirety.

Enclosed are:

- ☒ Specification, Claim(s), and Abstract (44 pages).
- ☐ Informal drawings (sheets) Figures
- ☒ Declaration and Power of Attorney
- ☒ Preliminary Amendment
- ☐ Assignment of the invention
- ☐ Assignment Recordation Cover Sheet.
- ☐ Check in the amount of \$40.00 for Assignment recordation.

09/138,287 "10/16/00"

- ☒ Small Entity statement.
- ☐ Information Disclosure Statement.
- ☐ Form PTO-1449 with copies of references.

1c853 U.S. PTO
09/688089
10/16/00

The filing fee is calculated below:

Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee			\$710.00	\$710.00
Total Claims: 8	- 20	= 0	x \$18.00	= \$0.00
Independents: 2	- 3	= 0	x \$80.00	= \$0.00
If any Multiple Dependent Claim(s) present:			+ \$270.00	= \$0.00
SUBTOTAL:				= \$710.00
[] Small Entity Fees Apply (subtract 1/2 of above):				= \$355.00
TOTAL FILING FEE:				= \$355.00

- ☒ A check in the amount of \$355.00 to cover the filing fee is enclosed.
- ☐ The Assistant Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Assistant Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date October 16, 2000

By 

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